

to identify the case:

ANDRI L COUNCIL JR

United States Bankruptcy Court for the: EASTERN District of PA (State)

Case number 2011322

Official Form 410

**Proof of Claim**

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503. Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim**

1. Who is the current creditor?

Pennsylvania Department of Revenue

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor

2. Has this claim been acquired from someone else?



No



Yes. From whom? \_\_\_\_\_

3. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?

Pennsylvania Department of Revenue

Name

Bankruptcy Division PO Box 280946

Harrisburg, PA 17128-0946

Number Street

Contact phone (717) 783-8989

Contact email

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

Where should payments to the creditor be sent? (if different)

Pennsylvania Department of Revenue

Name

Bankruptcy Division PO Box 280946

Harrisburg, PA 17128-0946

City State Zip Code

Contact phone (717) 783-8989

Contact email

4. Does this claim amend one already filed?



No



Yes. Claim number on court claims registry (if known) \_\_\_\_\_

Filed on MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?



No



Yes. Who made the earlier filing? \_\_\_\_\_

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Proof of Claim

Exhibit "A"

## Give Information About the Claim as of the Date the Case Was Filed

Do you have any number you use to identify the debtor?	
<input type="checkbox"/> No	
<input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:	_____
7. How much is the claim? <u>\$2,303.75</u> Does this amount include interest or other charges?	
<input type="checkbox"/> No	
<input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).	
8. What is the basis of the claim?	
Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.	
<u>Taxes</u>	
9. Is all or part of the claim secured?	
<input type="checkbox"/> No	
<input type="checkbox"/> Yes. The claim is secured by a lien on property.	
Nature of property:	
<input type="checkbox"/> Real estate.	If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form: 410-A) with this Proof of Claim.
<input type="checkbox"/> Motor vehicle	
<input type="checkbox"/> Other. Describe:	_____
Basis for perfection: <u>Lien</u>	
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)	
Value of property:	
Amount of the claim that is secured:	<u>0.00</u>
Amount of the claim that is unsecured:	<u>2,303.75</u> (The sum of the secured and unsecured amounts should match the amount in line 7.)
Annual Interest Rate (when case was filed) <u>5 %</u>	
<input checked="" type="checkbox"/> Fixed	
<input type="checkbox"/> Variable	
10. Is this claim based on a lease?	
<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____	
11. Is this claim subject to a right of setoff?	
<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Yes. Identify the property: _____	

part of the claim is entitled to priority under 11 U.S.C. § 507(a)?

☐ No

☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). Amount entitled to priority \$ \_\_\_\_\_

☐ Up to \$2,775\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$12,475\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ \_\_\_\_\_

☒ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ 1,743.39

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies. \$ \_\_\_\_\_

☐ \* Amounts are subject to adjustment on 4/01/16 and every 3 years after that for cases begun on or after the date of adjustment.

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

Part 3: Check the appropriate box:

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☒ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 7/28/2020

MM / DD / YYYY

/s/ Nicole Amolsch, Chief

Signature

Print the name of the person who is completing and signing this claim:

Name Cindy Cramer

Title

Company PA Department of Revenue

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 4th and Walnut Street

Number Street

Harrisburg PA 17128

City State Zip Code

Contact Phone (717) 787-3911 Email

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COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF REVENUE  
BUREAU OF COMPLIANCE  
PO Box 280946  
HARRISBURG PA 17128-0946



SUPPORTING DOCUMENTATION FOR  
TAXES DUE THE  
COMMONWEALTH OF  
PENNSYLVANIA  
DEPARTMENT OF REVENUE

☒ Original Claim  
☐ Amended Claim  
This claim supercedes all  
Previous claims filed.  
Date Amended:

Cindy Cramer

ANDRI L COUNCIL JR  
ANDRI L COUNCIL JR

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF PENNSYLVANIA  
Petition Filing Date: 03/02/2020  
Case Number: 2011322 EP  
Chapter: 13

The undersigned is an employee of the PA Department of Revenue and is authorized to make this proof of claim on the behalf of the Commonwealth . At this present time of the filing of this proof of claim, the Debtor was indebted to the Commonwealth in the

SUM OF \$2,303.75 for the following:

- ☐ State Sales, Use and Hotel Occupancy Tax, Article II, Tax Reform Code of 1971, as amended, 72 P.S. 7210
- ☒ Personal Income tax, Article III, Tax Reform Code of 1971, as amended, 72 P.S. 7301
- ☐ Employer Withholding Tax, Article IV, Tax Reform Code of 1971, as amended, 72 P.S. 7301
- ☐ Corporate Net Income Tax
- ☐ Capital Stock-Franchise Tax
- ☐ Corporate Loans Tax
- ☐ Other

**SECURED CLAIMS (Tax lien(s) filed before petition date)**

See attached statement of account detailing the liability.

Total secured claim: \_\_\_\_\_

Pursuant to Section 506(b) of the Bankruptcy Code, post petition Interest may be payable.

**ADMINISTRATIVE PRIORITY CLAIMS - Section 507(a)(1) of the Bankruptcy Code**

See attached statement of account detailing the liability.

Total administrative \_\_\_\_\_

**UNSECURED PRIORITY CLAIMS - Section 507(a)(8) of the Bankruptcy code for unliened priority  
Liabilities existing before petition date.**

See attached statement of account detailing the liability.

Total unsecured priority: \_\_\_\_\_

\$1,743.39

**UNSECURED NON-PRIORITY CLAIMS - unliened non-priority liabilities existing before the  
petition filing date.**

See attached statement of account detailing the liability.

Total unsecured non-priority claim: \_\_\_\_\_

\$560.36

Credits: The Commonwealth of Pennsylvania, Department of Revenue has not identified a right of setoff or counterclaim in preparing and filing this proof of claim. However, this determination is based on available information and the Commonwealth of Pennsylvania, Department of Revenue does not intend to waive any of its available rights to setoff against this claim debts owed to this debtor by this agency . All rights of setoff are preserved and reserved (including those arising as the result of audits, credits, refunds or payments) and will be asserted to the extent lawful.

/s/ Nicole Amolsch, Chief

